

Dartford, Gravesham & Swanley Mental Health Action Group

Funded by



Meeting on Tuesday 19th September, 2017, 1pm – 2.30pm
Dartford Civic Centre, Home Gardens, Dartford, DA1 1DR

Name	Organisation and Role
Alan Heyes	MHAG Chair, Mental Health Matters
David Garrick	MHAG Minutes, West Kent Mind
Sara Hegarty	North Kent Mind
Angela Powis	Porchlight
Teresa Snowden	Porchlight, Development & Monitoring Officer
Caroline Moore	Porchlight, Community Wellbeing – Network Ambassador
Karen Yusuf	Porchlight, Community Wellbeing – Network Manager
Raj Jhamat	Rethink Mental Illness, Mental Health Worker
Kirstie Wright	Insight Healthcare, CBT Therapist
Julie Williams	Dartford CYPMHS, Clinical Nurse Specialist/ Acting Team Leader
Kashmir Powar	Dartford Borough Council

APOLOGIES

Pip Darby DWP

1. Welcome, Introductions & Apologies

The Chair welcomed the group and apologies were noted as above.

2. Minutes from last meeting – no amendments

3. Action Points

- a) Local actions: None.
- b) Question raised at County MHAG: None raised.

4. Service User & Carer Questions

- a) Questions raised at the pre-meeting: None raised. No service users or carers attended the pre-meet. Barriers for attendance were discussed. It was noted that questions can be given in writing or can be brought to the meeting by a representative. Alan suggested circulating an email, to inform service users and carers that these options are available.
ACTION 1: Circulate an email informing service users and carers that questions for the MHAG can be given in writing or by proxy – David.
- b) Questions going forward to County MHAG: None

5. MHAG and Service User Forum review update

- It was noted that MHAGs in other areas have more participation from service users. In Swale, attendance is higher and SURF (Swale Service User Representative Forum) is very active, which creates an environment where people feel that they have a say.
- Additionally, the absence of key people (CCGs, KMPT, etc) may discourage service users from attending.
ACTION 2: Ask MEGAN (Medway Engagement Group and Network) to bring questions/ issues along to MHAGs and to promote MHAGs to service users – David.
- Teresa noted that in Porchlight's steering group, everyone (including service users) has an equal say in shaping services.

- The group discussed alternative DGS MHAG venues that might be e.g. less intimidating or have better parking, such as the Asda Community Room.
- In the terms of reference for the Live Well Kent (LWK) steering group, there is an expectation for delivery partners to encourage service users to attend. It may be useful for the MHAGs to include something similar.
- Teresa noted that it might be difficult to get people involved in MHAGs, but once involved they are often very committed to attending. Alan added that following through on action points and supporting service users may also be helpful.
- Attendance might be increased by ensuring meetings have purpose, deliver plans (e.g. wellbeing cafés) and are focusing on local issues. Task and Finish (T&F) groups are an example of this e.g. Swale's directory.
- Alan suggested developing a strategy for the next 12 months, with details such as buy in, who does what, timelines and directions (for T&F groups).
- Raj suggested encouraging creativity about what people's views are, without the pressure of an upcoming meeting – allows thoughts and opinions to come through.
- Alan suggested that it may be helpful to work with other MHAGs to tackle common issues across Kent.
- Potential themes of MHAGs were discussed, including: Long-term conditions, feeling safe, Live Well Kent (LWK) encountering lots of severe mental health presentations and the LWK service keeping some service users stable (as not everyone fits into the recovery model).
- Further changes were discussed, such as using the pre-meet as a discussion group, changing the timing and rebranding the DGS MHAG. Teresa agreed that it made sense for each MHAG to be different, as each area has different needs.
- A new topic is needed for T&F groups, as cafés are no longer operating.
- Alan suggested identifying the priorities for DGS and how these could be achieved.
- Teresa and Alan highlighted that one priority is how peer support and befriending could be used to help to support LWK service users who may be suitable for secondary care, or filling the gap at the end of a particular service. Alan added that there is lots of evidence that peer support is effective and it can support individuals after they have finished support groups.

ACTION 3: Look at a business case for peer support/befriending, including funding – Alan and Teresa

- The future direction of the DGS MHAG was discussed, including: Using technology such as Skype, and updating the Terms of Reference (ToR) as this had a positive impact in Swale. The new ToR could allow the views of service users to shape the meetings.
- Alan suggested engaging, consulting and planning a ToR update following the outcome of Kent County Council's MHAG and service user forum review.

ACTION 4: Look at updating the 'Terms of Reference' for the DGS MHAG following the outcome of KCC's review – Teresa, Alan, Kirsty

6. Information Sharing:

1. **County Update:** Please refer to the County draft minutes for full details of discussion, located at www.westkentmind.org.uk/mental-health-action-groups
2. **Commissioners Reports:** All reports have been circulated and are located at www.westkentmind.org.uk/mental-health-action-groups

Porchlight, Teresa: Information not included in the LWK Porchlight report:

- When asked about criteria for Payment By Results (starting on 1st October), Teresa confirmed that some criteria are fixed, such as employment outcomes, which are clearly defined. There will likely be issues in contacting some people (e.g. those who do not have a phone), but can account for this.
- Teresa was asked if development partners, such as smaller charities, would struggle with the audit trail. She responded that no organization is on 100% payment by results,

that there is flexibility in terms of any penalties and that Porchlight meet regularly with their development partners, so can intervene and look at improving things early if there are any problems. Payment By Results is there for good reasons e.g. maintaining quality.

3. Provider Service Update/New Members:

Dartford Children and Young People's Mental Health Service (CYPMHS), Julie:

- On 1st September, The North East London Foundation Trust (NELFT) took over the contract for CYPMHS and is still in the consultation phase. The same model is being used at the moment, but by March a different model will be in place. 40-50 referrals from under-18s are received each day across Kent. The service is not yet fully staffed.
- The eating disorder service is part of the Single Point of Access (SPoA). The phone number for the SPoA is 0300 1234496.

ACTION 5: Circulate leaflet for the new CYPMHS services – David

Porchlight, Karen (Community Wellbeing – Network Manager):

- The Dartford Community Wellbeing Network is hoping to get into the community and set up activities, by involving people who can share e.g. gardening or carpentry skills.

ACTION 5: Circulate wellbeing network leaflet - David

- Porchlight are working closely with the Dartford Healthy Living Centre, to empower people to start their own groups. Please pass any local knowledge to Karen.

North Kent Mind, Sara:

- Sara is managing the Aspirations Project, which works with those individuals who are the hardest to reach. There tends to be low levels of employment, and agoraphobia is common. (An opportunity arose to link up with a similar, former Porchlight project.)

Porchlight, Caroline:

- There is a 'Love Later Life' event at Northfleet Girl's School on 25th Oct from 10am-2pm.

4. Staff changes

- Teresa: A vacant housing post has been filled by Matthew Daniels.
- Caroline: There is a part-time vacancy.
- **ACTION 7: Circulate part-time vacancy from Caroline - David**

7. Task & Finish Group Update

- Both Teresa and Kirsty suggested collaborating to better understand and react to situations where a service user's needs become too high for them to benefit optimally from the service. Alan suggested gathering data and evidence as a combined effort, so that a business case can be developed for stepping up/ stepping down clients, based on each service's Key Performance Indicators.
- Teresa suggested that the definition of IAPT (Improving Access to Psychological Therapies) clusters in Swale may be a good start. She added that if clients' needs are too high, then they may not get much from the service without additional support.
- In cases where, for example, someone's tenancy is at risk, or where they are experiencing a severe mental health crisis, then offering a community activity service (without them receiving additional support for these issues), will not best meet their needs. If they need secondary care, then engaging them solely in LWK services may not be appropriate.
- For the Task & Finish (T&F) group, identify Porchlight's criteria, including who is unlikely to benefit from LWK services alone and identify gaps in overall service provision.
- It was agreed that the Swale MHAG's T&F report would be circulated first. Teresa proposed looking at monthly numbers (compared with the population) and can gather data before the next MHAG. It was suggested that CCG and KMPT involvement would be

helpful. Kirsty said that she would share cluster information. Alan added that they could identify who they are working with outside of these criteria.

- At the next meeting, the T&F group, any data and the service spec will be reviewed.
- **ACTION 8: Gather data relevant to the DGS T&F group – Teresa and Kirsty.**

Additional discussions:

- CYPMHS Community Psychiatric Nurses (CPNs): Dartford is close to areas that receive the London weighting for CYPMHS CPN pay, which caused problems in recruitment. Julie noted that London weighting pay is in place for 6 months in Dartford and that they are now fully staffed.
- World Mental Health Day on 10th October. Possible events were discussed.
ACTION 9: Circulate information about World Mental Health Day.

8. Date of next meeting

The next meeting is scheduled for 14th November, 2017, 12.30pm at **Dartford Civic Centre**, Home Gardens, Dartford, DA1 1DR.

Action Table

No.	Action	Responsibility	Status
1	Circulate an email informing services users and carers that questions for the MHAG can be given in writing or by proxy.	David	
2	Ask MEGAN to bring questions/ issues along to MHAGs and to promote MHAGs to service users.	David	
3	Look at a business case for peer support/befriending, including funding.	Alan, Teresa	
4	Look at updating the 'Terms of Reference' for the DGS MHAG following the outcome of KCC's review	Teresa, Alan, Kirsty	
5	Circulate leaflet for the new CYPMHS services.	David	
6	Circulate the wellbeing network leaflet.	David	
7	Circulate part-time vacancy from Caroline.	David	
8	Gather data relevant to the DGS T&F group.	Teresa, Kirsty	
9	Circulate email about World Mental Health Day.	David	

Administration :

Phone: 01732 744950

Email: mhag@westkentmind.org.uk



Minutes and supporting documents are posted on:

<https://westkentmind.org.uk/mental-health-action-groups>